



Aging Committee Public Hearing, March 3, 2022,  
Testimony of AARP Connecticut in **Support** of:

- S.B. 173, *An Act Concerning a Study of the Cost and Feasibility of Permitting the Community Spouse of an Institutionalized Medicaid Recipient to Retain the Maximum Amount of Allowable Assets*
  - S.B. 174, *An Act Concerning a Study of Long-Term Care Needs*
- S.B. 175, *An Act Expanding Eligibility for the Alzheimer's Disease Respite Care Program and Supporting Aging in Place*
  - H.B. 5197, *An Act Concerning a Study of the Needs of Senior Citizens*

Good morning, Senator Miller, Representative Garibay, Ranking Members, and Members of the Aging Committee. AARP is a nonpartisan, social mission organization with an age 50+ membership of nearly 38 million nationwide and nearly 600,000 members here in Connecticut. AARP supports livable communities for all ages, aging in place initiatives, and financial opportunity and resilience for everyone as they work, age, and retire. We are before the General Assembly every year on a multitude of bills that support these issues, including several bills that you are considering today.

***S.B. 173, An Act Concerning a Study of the Cost and Feasibility of Permitting the Community Spouse of an Institutionalized Medicaid Recipient to Retain the Maximum Amount of Allowable Assets***

When a married individual moves into a nursing home, his/her spouse who remains at home (the "community spouse") must "spend down" their assets to a set amount before the institutionalized spouse can become eligible for Medicaid. When this "spend down" happens, the community spouse loses his/her personal rainy-day fund and is not as well equipped to address any future needs that may arise. Allowing community spouses to keep more of these assets would provide them with the financial cushion they need to take care of themselves in the community and plan for their own future care and well-being. In Connecticut, more than 1 in 7 nursing home residents are under the age of 65<sup>1</sup>, and their community spouses may continue living in the community for several decades.

Connecticut currently allows community spouses to retain half of the couple's countable assets up to \$137,400 (the federal maximum). Allowing a community spouse to keep 100% of their assets up to the federal maximum is appropriate considering that Connecticut is a relatively high-cost state with an above average life expectancy. 14 other states, including Maine and Vermont, already allow community spouses to retain 100% of their assets up to the federal maximum. We support this proposal to have the Department of Social Services study the cost and feasibility of this approach in Connecticut.

The Human Services Committee raised a bill this session, S.B. 195, *An Act Increasing the Minimum Amount of Assets That May Be Retained by the Spouse of an Institutionalized Medicaid Recipient*, that would raise the minimum resource standard for community spouses.

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<sup>1</sup> <https://portal.ct.gov/-/media/OPM/NF-Fact-Sheet-2019.pdf>

We support that proposal as well. Allowing community spouses to retain more assets – whether through increasing the minimum resource standard, allowing spouses to keep 100% of assets up to the federal maximum, or both – would support independent living and make a difference in the lives of thousands of Connecticut residents.

### ***S.B. 174, An Act Concerning a Study of Long-Term Care Needs***

Connecticut is the seventh-oldest state in the country,<sup>2</sup> and the number of older adults in our state is expected to increase rapidly in the coming years. It will be critical for policymakers to understand and plan for these demographic changes.

While many of the data points outlined in S.B. 174 are available through various sources,<sup>3</sup> it would be helpful for the Department of Social Services and the Department of Aging and Disability Services to produce a single report that summarizes current and projected numbers of: older adults in the state, individuals with long-term care needs, and individuals who have successfully transitioned into the community using the Money Follows the Person program. Contextualizing this information and making it available to members of the community and policymakers would facilitate discussions about unmet needs and appropriate resource allocation.

### ***S.B. 175, An Act Expanding Eligibility for the Alzheimer’s Disease Respite Care Program and Supporting Aging in Place***

Individuals with Alzheimer’s disease live an average of 4 to 8 years after diagnosis.<sup>4</sup> With proper support, many people with Alzheimer’s and other dementias can continue living at home during all or a portion these years. Unpaid family caregivers are crucial to providing this long-term care, and S.B. 175 would provide more of them with access to needed respite services.

Compared to other types of family caregivers, caregivers of people with dementia are twice as likely to report substantial emotional, financial, and physical difficulties. They are also likely to provide care over a long period of time, with half of them providing care for four years or more.<sup>5</sup> When asked what types of services would be helpful, nearly 40% of family caregivers say that it would be helpful to have respite services available; this number increases to 46% for caregivers who care for someone with a memory issue.<sup>6</sup>

Programs like the Statewide Respite Care Program provide much-needed relief to the family caregivers who take care of their loved ones at home. AARP Connecticut strongly supports the respite program and would like for it to be available to as many people as possible through increased income and asset limits. We would note, however, that the upper asset limit for program participation is set to reach \$135,892 beginning on July 1, 2022.<sup>7</sup> S.B. 175, as written, would set a slightly lower asset limit of \$135,000.

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<sup>2</sup> [http://healthyagingdatareports.org/wp-content/uploads/2021/06/CT-Healthy-Aging-Report-2020\\_final.pdf](http://healthyagingdatareports.org/wp-content/uploads/2021/06/CT-Healthy-Aging-Report-2020_final.pdf)

<sup>3</sup> Population projections: <http://data.ctdata.org/>

LTC Needs: <https://portal.ct.gov/-/media/Departments-and-Agencies/DSS/Health-and-Home-Care/Medicaid-Long-Term-Care-Demand-Projections/Main-report--CT-LTC-Demand-Report-Narrative.pdf>

MFP transitions: <https://health.uconn.edu/aging/wp-content/uploads/sites/102/2022/02/2021-Q4-MFP-report-FINAL.pdf>

<sup>4</sup> Alzheimer’s Association <https://www.alz.org/alzheimers-dementia/stages>

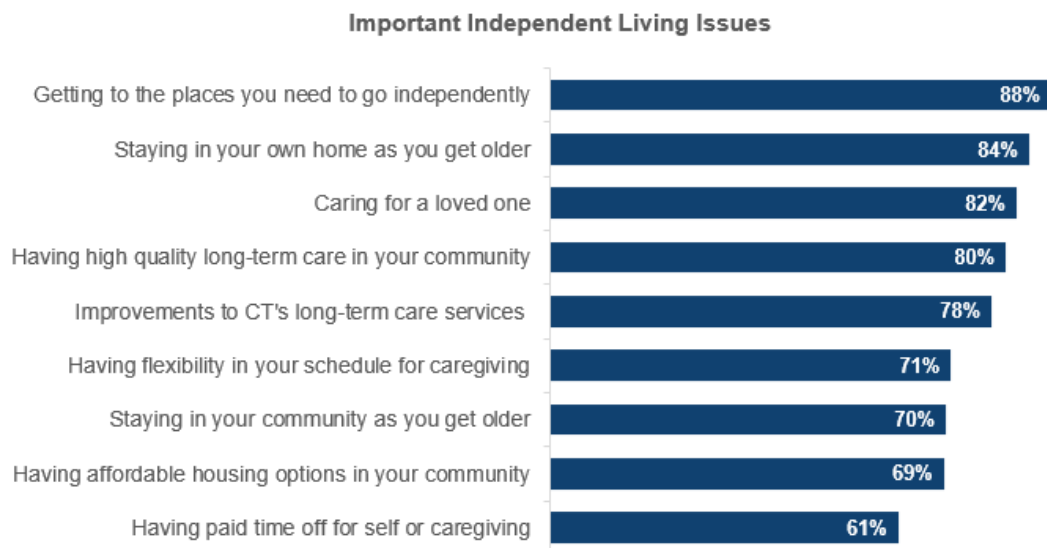
<sup>5</sup> [Alzheimer’s Respite Care Infrastructure \(alzimpact.org\)](https://www.alz.org/alzheimers-dementia/stages)

<sup>6</sup> <https://www.caregiving.org/wp-content/uploads/2021/01/full-report-caregiving-in-the-united-states-01-21.pdf>

<sup>7</sup> <https://portal.ct.gov/AgingandDisability/Content-Pages/Programs/Connecticut-Statewide-Respite-Care-Program>

## H.B. 5197, *An Act Concerning a Study of the Needs of Senior Citizens*

During the summer of 2020, AARP Research surveyed older Connecticut residents and asked them about the importance of various independent living issues.<sup>8</sup> They rated the following issues as “extremely important” or “very important”:



11. For the following list of issues, please indicate how important each is to you personally. (Percent 'extremely important' or 'very important') (n=702)

H.B. 5197 would require the Commission on Women, Children, Seniors, Equity and Opportunity to conduct a study of the needs of older adults, including their needs related to: long-term care, transportation, housing assistance, nutritional assistance, and opportunities for socialization. These topics align nicely with the issues that older Connecticut residents identified as being important to their ability to live independently in the community. As mentioned above in our comments regarding S.B. 174, we have a rapidly aging state. It is critical for policymakers to understand what older adults think is important and what they will need to remain safely and independently in our Connecticut communities in the coming years.

Thank you for the opportunity to share our support for S.B. 173, S.B. 174, S.B. 175, and H.B. 5197.

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<sup>8</sup> <https://doi.org/10.26419/res.00351.102>